

APR 14 2005

## Certificate of Facsimile Transmission

I hereby certify that the attached Transmittal (2 pages), Response to the Office Action dated January 14, 2005 (8 pages), Two replacement sheets drawings (comprises Figs. 2 and 3), Two annotated sheets drawings showing the changes (comprises Figs. 2 and 3) PTO form 2038 authorizing credit card payment of \$180.00 for filing IDS and PTO form 1449 Information Disclosure Statement with 2 cited references (11) are submitted to the U.S. Patent and Trademark Office via facsimile number 703-872-9306 on the date shown below. (Total 26 pages).



Li Mei Vermilya

Date: April 14, 2005

PATENT APPLICATION  
Docket No.: 9898-323  
Client Ref. No.: SS-18809-US

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Nak-Won HEO and Chang-Sik YOO

Serial No.: 10/728,630

Examiner: Lam, Tuan Thieu

Filed: December 5, 2003

Group Art Unit: 2816

Confirmation No.: 9080

For: CIRCUIT FOR GENERATING A DATA STROBE SIGNAL USED  
IN A DOUBLE DATA RATE SYNCHRONOUS  
SEMICONDUCTOR DEVICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Responsive to the Office Action dated January 14, 2005, enclosed is an amendment in the above-identified application.

The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For:	Number After Amendment	Previous Number	Extra	Rate	Additional Fee
Total Claims	14	15	0	x \$50 =	\$0
Independent Claims	3	2	0	x \$200 =	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

\*greater of twenty (20) or number for which fee has been paid  
\*\*greater of three (3) or number for which fee has been paid

FEE ONLY

- ☒ PTO form 1449 Information Disclosure Statement with 2 cited references.
- ☒ PTO Form 2038 authorizing credit card payment of \$180.00 for filing Information Disclosure Statement.
- ☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703.

Customer No. 20575

Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.



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**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2004

Application or Docket Number

**10/728630**

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<b>15</b> minus 20 =	
INDEPENDENT CLAIMS	<b>2</b> minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	<b>395.00</b>	OR	BASIC FEE	<b>790.00</b>
X		OR	X	
X		OR	X	
+		OR	+	
TOTAL		OR	TOTAL	

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	<b>4/14/05</b>	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<b>14</b>	Minus	<b>20</b>	=
	Independent	<b>4</b>	Minus	<b>3</b>	= <b>1</b>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X		OR	X	
X		OR	<b>200</b>	<b>200</b>
+		OR	+	
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE	<b>pd.</b>

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		=
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X		OR	X	
X		OR	X	
+		OR	+	
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		=
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X		OR	X	
X		OR	X	
+		OR	+	
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.